

## 2017-2018 SEASONAL INFLUENZA VACCINE PRE-BOOK INSTRUCTIONS

The Idaho Immunization Program (IIP) will supply 2017-2018 pediatric seasonal influenza vaccine, to all providers actively enrolled with the program, for patients eligible to receive IIP-supplied vaccine.

**Do not privately purchase pediatric influenza vaccine for the 2017-2018 season.<sup>1</sup>**

Please complete and return to the IIP page 2 of this pre-book if your office missed the 2017-2018 Seasonal Influenza Vaccine Pre-Book deadline (February 1, 2017), if your office enrolled with the IIP after February 1, 2017, or if your office would like to request a change or update to a previously submitted 2017-2018 Seasonal Influenza Vaccine Pre-Book. On page 2 please indicate the total number of 2017-2018 pediatric influenza doses your office is interested in ordering from the IIP throughout the 2017-2018 influenza season. Please note that **a signature is required** on the 2017-2018 Seasonal Influenza Vaccine Pre-book. The physician in-charge of immunizations or chief executive officer must review the vaccine formulations, number of doses, and sign the pre-book.

If your office has recently enrolled in the IIP, missed the February 1, 2017 pre-book deadline, or would like to revise your original pre-book, then this request must be completed, signed, and submitted to the IIP. The completed pre-book may be returned by fax (208-334-4914) or email ([IIP@dhw.idaho.gov](mailto:IIP@dhw.idaho.gov)) only.

All pediatric influenza vaccines supplied by the IIP for the 2017-2018 influenza season will be quadrivalent formulations. Please record the number of doses for each vaccine, trade name, and presentation that your office expects to order during the 2017-2018 season.

The [Show Transactions](#) and Doses Administered reports in the Immunization Reminder Information System (IRIS) are helpful tools to use when establishing the number of doses needed. These reports will indicate how many doses of influenza vaccine your organization received, administered (by age), and wasted during the 2015-2016 and 2016-2017 influenza seasons (please note: your accountability must be current).

<sup>1</sup> Unless your office serves non-VFC eligible children who do not reside in Idaho or Washington.

**Pre-book on Back**

## 2017-2018 SEASONAL INFLUENZA VACCINE PRE-BOOK

Organization: \_\_\_\_\_ VFC Pin: \_\_\_\_\_

Prepared By: \_\_\_\_\_

Please complete and return this pre-book indicating the total number of 2017-2018 pediatric seasonal influenza vaccine doses your office would like to order from the Idaho Immunization Program (IIP). The completed pre-book may be returned by fax (208-334-4914) or email ([IIP@dhw.idaho.gov](mailto:IIP@dhw.idaho.gov)) only.

Please indicate what type of request this is by checking one of the following boxes:

☐ New Provider ☐ Late Submission ☐ Revision Request

Please complete the table below indicating the number of pediatric seasonal influenza vaccine doses for each presentation that your organization would like to order from the IIP.

Vaccine	Trade Name	Manufacturer	Presentation	Mercury Content (mcg Hg/0.5 mL dose)	Age Group	Number of Doses
QIV	FLUZONE®	Sanofi Pasteur	0.25 mL prefilled syringe	0	6-35 months	
			0.5 mL single dose vial	0	≥ 36 months	
			0.5 mL prefilled syringe	0	≥ 36 months	
			5.0 mL multi-dose vial	25	≥ 6 months	
QIV	FLULAVAL®	GlaxoSmithKline	0.5 mL prefilled syringe	0	≥ 6 months	
			5.0 mL multi-dose vial	<25	≥ 6 months	
QIV	FLUARIX®	GlaxoSmithKline	0.5 mL prefilled syringe	0	≥ 36 months	
QIV	FLUCELVAX®	Seqirus	0.5 mL prefilled syringe	0	≥4 years	
			5.0 mL multi-dose vial	25	≥4 years	

This influenza vaccine pre-book does not constitute a vaccine order and the IIP cannot guarantee the presentations or number of doses requested will be available.

\_\_\_\_\_  
Name of Physician in-Charge of Immunizations or Chief Executive Officer (please print)

\_\_\_\_\_  
Signature of Physician in-Charge of Immunizations or Chief Executive Officer

\_\_\_\_\_  
Date

### Instructions on Front



IDAHO DEPARTMENT OF HEALTH & WELFARE  
DIVISION OF PUBLIC HEALTH